

**Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions**

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
CITY OF INDIAN WELLS			
Division, Department, or Region (if applicable)			
Street Address			
44950 ELDORADO DRIVE		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Designated Agency Contact (Name, Title)			
RODERICK J. WOOD, INTERIM CITY MANAGER			
Area Code/Phone Number	E-mail		
760/346-2489	rwood@indianwells.com		

2. Function, Event, or Ceremonial Role Information

Title BNP PARIBAS OPEN TENNIS Face Value of Each Admission \$ 2,500

Description TENNIS TOURNAMENT Date(s) 3 / 8 / 12 3 / 18 / 12

Ticket(s)/Admission(s) provided by agency? Yes ☒ No ☐ If no: _____
 Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☐ No ☒ If yes: _____
 Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.
Wilkey, Micaela	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Promotion of Marketing & Tourism Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,

RODERICK J. WOOD

INTERIM CITY MANAGER

Print Name

Title

4-10-12
 (month, day, year)

For any additional information including amendment explanation.)